



## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Hendricksen et al.  
Serial No.: 10/645,473  
Confirm. No.: 8003  
Customer No.: 24961  
Filed: August 20, 2003  
For: **DELIVERY METHODS AND  
DEVICES FOR IMPLANTABLE  
BRONCHIAL ISOLATION DEVICES**

I hereby certify that this paper and the attached papers are being deposited with the United States Postal Service as first class mail in an envelope addressed to:  
Commissioner for Patents  
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01/26/04  
Date



Lynn Morkunas

## REQUEST FOR CORRECTED FILING RECEIPT

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Attached is a copy of the official filing receipt received from the PTO in the above application for which issuance of a corrected filing receipt is respectfully requested.

Under **APPLICANT(S)**, please insert the following corrected information:

**MICHAEL HENDRICKSEN, REDWOOD CITY, CA;  
RONALD R. HUNDERTMARK, SAN MATEO, CA;  
DAVID R. THOLFSEN, SAN FRANCISCO, CA  
PETER M. WILSON, KILLINGWORTH, CT;  
ANTONY J. FIELDS, SAN FRANCISCO, CA**

Applicants respectfully request that this error be corrected and Applicants be provided a corrected filing receipt.

**U.S.S.N. 10/645,473  
Hendrickson et al.  
REQUEST FOR CORRECTED FILING RECEIPT**

- The Commissioner is hereby authorized to charge any fee, including any submitted herewith if the attached check(s) is in the wrong amount or otherwise improper or missing, that may be due in connection with this and the attached papers, or with this application during its entire pendency to or to credit any overpayment to Deposit Account No. 50-1213. A duplicate of this sheet is enclosed.

Respectfully submitted,  
**HELLER EHRMAN WHITE & McAULIFFE**

By:

  
**Fred C. Hernandez**  
Registration No. 41,832

Attorney Docket 38349-0121

**Address all correspondence to:**

Stephanie L. Seidman, Esq.

**HELLER EHRMAN WHITE & McAULIFFE**

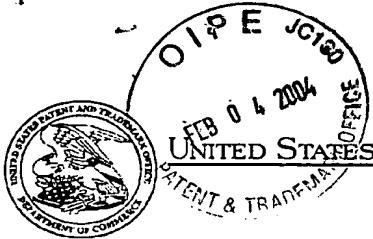
4350 La Jolla Village Drive, 7th Floor

San Diego, California 92122-1246

Telephone: (858) 450-8400

Facsimile: (858) 587-5360

E-mail: [sseidman@HEWM.com](mailto:sseidman@HEWM.com)



## UNITED STATES PATENT AND TRADEMARK OFFICE

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APPL NO.	FILING OR 371 (c) DATE	ART UNIT	FIL FEE REC'D	ATTY.DOCKET NO	DRAWINGS	TOT CLMS	IND CLMS
10/645,473	08/20/2003	2855	746	38349-0121	30	40	6

## CONFIRMATION NO. 8003

Stephanie L. Seidman  
Heller Ehrman White & McAuliffe LLP  
7th Floor  
4350 La Jolla Village Drive, Suite 700  
San Diego, CA 92122-1246

## UPDATED FILING RECEIPT



\*OC000000011659121\*

Date Mailed: 01/09/2004

Receipt is acknowledged of this regular Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Filing Receipt Corrections, facsimile number 703-746-9195. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

## Applicant(s)

*REDWOOD*

Michael Hendrickson, Reedwood City, CA;  
Ronald R. Hundertmark, San Mateo, CA;  
David R. Tholfsen, San Francisco, CA;  
Peter M. Wilson, Killingworth, CT;  
Antony J. Fields, San Francisco, CA;

## Domestic Priority data as claimed by applicant

This appln claims benefit of 60/405,418 08/21/2002  
and is a CIP of 09/797,910 03/02/2001  
and is a CIP of 10/270,792 10/10/2002

## Foreign Applications

If Required, Foreign Filing License Granted: 11/15/2003

Projected Publication Date: 04/22/2004

Non-Publication Request: No

Early Publication Request: No

\*\* SMALL ENTITY \*\*

**Title**

Delivery methods and devices for implantable bronchial isolation devices

**Preliminary Class**

073

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Title 37, Code of Federal Regulations, 5.11 & 5.15**

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